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Bib Data Sheet

CONFIRMATION NO. 5411

SERIAL NUMBER 10/727,248	FILING DATE 12/03/2003 RULE	CLASS 359	GROUP ART UNIT 2873	ATTORNEY DOCKET NO. NORTE-510A
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APPLICANTS

James M. Cicchiello, Cary, IL;

** CONTINUING DATA ***** *none Aff*

** FOREIGN APPLICATIONS ***** *none Aff*

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 ** 03/15/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>RA</i> Allowance Examiner's Signature Initials	STATE OR COUNTRY IL	SHEETS DRAWING 4	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 6
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TITLE
 Electronically modulated prism

FILING FEE RECEIVED 640	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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